

OCCURRENCE DATE(S)				DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO.	INCIDENT NO.	STN#	PRIMAR									
ON OR BETWEEN																						
MM/DD/YY	MM/DD/YY	MM/DD/YY	AGENCY				GEOGR. CODE	CASE NUMBER		BURGLAR FORCE NO F.	NO. OF UNITS ENT.											
TIME	DAY OF WEEK	TIME	DAY OF WEEK	TIME	DAY OF WEEK	ADDRESS / LOCATION OF INCIDENT				CITY	CTY.	ZIP	GANG REL. YES NO	HATE / BIAS MOT. CODE								
07/25/2015	07/25/2015	07/25/2015	SANTA FE PD				01075	15-010839		<input checked="" type="checkbox"/>	<input type="checkbox"/>	1										
18:00	SAT	20:00	SAT	21:17	SAT	1515 WEST ALAMEDA ST				SANTA FE	01	87507	<input checked="" type="checkbox"/>	00								
OFFENSE / INCIDENT						STATUTE OR ORDINANCE	FEL / MISD.	ATTEMPTED/ COMPLETED	UCR OFFENSE CODE	DOM. VIOL.	SEX CRIME?	CHILD	CRIMINAL ACTIVITY CODE	LOCAT. CODE	WEAPON CODE UP TO 3 PER OFFENSE	OFFENDER(S) SUSPECTED OF USING						
						1	BURGLARY AUTO, WATERCRAFT, COMME	30-16-3B	F	C	23F	NO	NO	NO		18	95	95	95	UNK	UNK	NO
PERSON CODES						TYPE CODES		INJURY CODES		ETHNIC CODES												
						P-POLICE G-PARENT/GUARDIAN R-REPORTING PERSON I-INTERVIEWED		O-OTHER U-UNKNOWN		B-APPARENT BROKEN BONE I-POSSIBLE INTERNAL INJURY L-SEVERE LACERATION		M-APPARENT MINOR INJURY O-OTHER MAJOR INJURY T-LOSS OF TEETH		B-BLACK H-HISPANIC/MEXICAN J-JAPANESE A-AMERICAN INDIAN/NATIVE AMERICAN		A-ASIAN/ORIENTAL C-CHINESE J-JAPANESE U-UNKNOWN		W-WHITE O-OTHER U-UNKNOWN				
PERSON N CODE V	TYPE CODE I	INJURY CODE N	1-NAME (LAST, FIRST, MIDDLE, SUFFIX)				RUBEN L															
STREET ADDRESS						APT. NO.	CITY				CTY.	STATE	ZIP									
1229 CHACOMA VISTA							ESPANOLA				01	NM	87532-0000									
RES. PHONE						BUS. PHONE		SOCIAL SECURITY NO.		DOB	AGE	SEX	RACE									
(505) 927-9067												M	WHT BLK ASIA IND UNK									
HEIGHT	WEIGHT	HAIR	EYES	ETHNIC	AGG. ASSAULT JUST. HOM. CODE	VICTIM OF OFF. NO.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	REL.										
5' 10"	160 LBS	BLK	BRO																			
PERSON N CODE V	TYPE CODE I	INJURY CODE N	1-NAME (LAST, FIRST, MIDDLE, SUFFIX)				ELAINE															
STREET ADDRESS						APT. NO.	CITY				CTY.	STATE	ZIP									
22 REEDS PEAK							SANTA FE				01	NM	87508									
RES. PHONE						BUS. PHONE		SOCIAL SECURITY NO.		DOB	AGE	SEX	RACE									
(505) 819-8993						(505) 471-1058						F	WHT BLK ASIA IND UNK									
HEIGHT	WEIGHT	HAIR	EYES	ETHNIC	AGG. ASSAULT JUST. HOM. CODE	VICTIM OF OFF. NO.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	REL.										
5' 03"	170 LBS	BLK	BRO																			
PROPERTY STATUS 1	PROPERTY TYPE 25	TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE										
		PURSE								\$20.00												
SUSPECTED DRUG TYPE	QUANTITY	UNIT OF MS.	DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)			SERIAL / OAN			DATE RECOVERED		N.I.C. NO.											
	1		BLACK PURSE																			
PROPERTY STATUS 1	PROPERTY TYPE 42	TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE										
		GLASSES								\$200.00												
SUSPECTED DRUG TYPE	QUANTITY	UNIT OF MS.	DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)			SERIAL / OAN			DATE RECOVERED		N.I.C. NO.											
	1		GLASSES																			
YEAR	MAKE	MODEL		BODY STYLE		LICENSE NO.		LIC. YEAR	LIC. ST.	TOP COLOR		BTM. COLOR										
2012	MAZD	3		4D		594RAJ		2015	NM	BLU		BLU										
VALUE / DAMAGE EST.																						
500																						
SYNOPSIS ON SATURDAY, JULY 25, 2015 I WAS DISPATCHED TO 1515 WEST ALAMEDA IN REFERENCE TO A BURGLARY OF A MOTOR VEHICLE. UPON ARRIVAL I SPOKE WITH THE VICTIMS WHO STATED THERE VEHICLE WAS BROKEN INTO AND ITEMS WERE TAKEN. THEY STATED A CREDIT CARD HAD BEEN TRIED TO USE AND AN ALL-SUBS.																						
CERT. / STATUS "I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED." YES <input type="checkbox"/> NO <input type="checkbox"/> "I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE." COMPLAINTANT / VICTIM CERTIFICATION SIGNATURE X DATE																						
REPORTING OFFICER (PRINT)				RANK	I.D. NO.	DATE	DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO			I.D. NO.	DATE											
SWEENEY, ANTHONY				POI	7393	07/25/2015																
ASSISTING OFFICER (PRINT)				RANK	I.D. NO.	DATE	PROCESSED BY		DATE	DATA ENTRY PERSON		DATE										
GONZALES, JOSE				SGT	5667	07/25/2015																
APPROVING OFFICER (PRINT)				RANK	I.D. NO.	DATE	INCIDENT STATUS			EXCEPT CODE	DATE											
GONZALES, JOSE				SGT	5667	07/25/2015	<input checked="" type="checkbox"/> ACTIVE <input type="checkbox"/> INACT. <input type="checkbox"/> CLOSED <input type="checkbox"/> U.F. <input type="checkbox"/> C.L.A. <input type="checkbox"/> C.L.E.			N	07/25/2015											
AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.)				CASES CLEARED BY THIS ARREST			CASE NO.			CASE NO.												
INV				CASE NO.																		

OCCURRENCE DATE(S)		DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-010771		STN# 02		PRIMAR YES																			
ON OR BETWEEN																																	
MM/DD/YY 07/24/2015		MM/DD/YY 07/24/2015		MM/DD/YY 07/24/2015		AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-010771		BURGLAR FORCE NO F. YES NO		NO. OF UNITS ENT.																	
TIME 13:00		DAY OF WEEK FRID		TIME 14:21		DAY OF WEEK FRID		TIME 14:21		DAY OF WEEK FRID		ADDRESS / LOCATION OF INCIDENT 2020 CALLE LORCA				CITY SANTA FE		CTY. 01		ZIP 87505		GANG REL. YES NO		HATE / BIAS MOT. CODE 00									
OFFENSE		OFFENSE / INCIDENT						STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING					
		1 UNATTENDED DEATH						SFPD-08		N		C		90Z		NO		NO		NO				13		01				ALCOH. DRUG COMP.			
SUBJECTS / SUSPECTS / BUSINESSSES		PERSON CODES		V-VICTIM		W-WITNESS		O-OTHER		TYPE CODES		P-POLICE		O-OTHER		INJURY CODES		ETHNIC CODES		A-ASIAN/ORIENTAL		W-WHITE											
		O-PARENT/GUARDIAN		C-CITIZEN		D-DECEASED				H-INDIVIDUAL		G-GOVERNMENT		U-UNKNOWN		B-APPARENT BROKEN BONE		B-BLACK		C-CHINESE		O-OTHER											
		R-REPORTING PERSON		S-SUSPECT		M-MISSING PERSON/				B-BUSINESS		R-RELIGIOUS				M-APPARENT MINOR INJURY		H-HISPANIC/MEXICAN		J-JAPANESE		U-UNKNOWN											
		I-INTERVIEWED		A-ARRESTED		RUNAWAY				F-FINANCIAL INST.		S-SOCIETY/PIB				O-OTHER MAJOR INJURY		J-JAPANESE		U-UNKNOWN													
		PERSON N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																									
		D		I		U		REVEL																									
								VINCENT																									
								STREET ADDRESS		APT. NO.		CITY																					
								918 1/2 DON JUAN STREET				SANTA FE																					
								RES. PHONE		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX		RACE													
																M		WHT BLK ASIA IND UNK															
						HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.			
						5' 09"		175 LBS		BRO		GRN																					
SUBJECTS / SUSPECTS / BUSINESSSES		PERSON N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																									
		I		I		N		PROSSEDA																									
								GELASIO																									
								STREET ADDRESS		APT. NO.		CITY																					
								304 RHODE ISLAND SE				ALBUQUERQUE																					
								RES. PHONE		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX		RACE													
								(570) 742-3331										M		WHT BLK ASIA IND UNK													
								HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.	
								5' 09"		145 LBS		BRO		BRO																			
SYNOPSIS		PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE																	
		5		77		STATEMENTS																											

OCCURRENCE DATE(S)						DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET								ORI NO. NM0260100		INCIDENT NO. 15-008675		STN# 01		PRIMAR YES																			
ON		OR		BETWEEN												GEOGR. CODE 13026		CASE NUMBER 15-008675		BURGLAR FORCE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		NO. OF UNITS ENT.																			
MM/DD/YY 07/24/2015		MM/DD/YY 07/24/2015		MM/DD/YY 07/24/2015		AGENCY SANTA FE PD		ADDRESS / LOCATION OF INCIDENT RUFINA CIR								CITY SANTA FE		CTY. 87505		ZIP 87505		HATE / BIAS MOT. CODE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO																			
TIME 08:00		DAY OF WEEK FRID		TIME 08:20		DAY OF WEEK FRID		TIME 08:20		DAY OF WEEK FRID		OFFENSE / INCIDENT WARRANT SERVICE								STATUTE OR ORDINANCE SFPD-03		FEL./ MISD. M		ATTEMPTED/ COMPLETED C		UCR OFFENSE CODE		DOM. VIOL. NO		SEX CRIME? NO		CHILD NO		CRIMINAL ACTIVITY CODE		LOCAT. CODE 13		WEAPON CODE UP TO 3 PER OFFENSE 01 01 01		OFFENDER(S) SUSPECTED OF USING UNK UNK NO	
PERSON CODES G-PARENT/GUARDIAN R-REPORTING PERSON I-INTERVIEWED		V-VICTIM C-CITED S-SUSPECT A-ARRESTED		W-WITNESS D-DECEASED M-MISSING PERSON/ RUNAWAY		O-OTHER		TYPE CODES I-INDIVIDUAL B-BUSINESS F-FINANCIAL INST.		P-POLICE Q-GOVERNMENT R-RELIGIOUS S-SOCIETY/PUB		O-OTHER U-UNKNOWN		INJURY CODES B-APPARENT BROKEN BONE I-POSSIBLE INTERNAL INJURY L-SEVERE LACERATION		M-APPARENT MINOR INJURY O-OTHER MAJOR INJURY T-LOSS OF TEETH		U-UNCONSCIOUSNESS N-NONE		ETHNIC CODES B-BLACK H-HISPANIC/MEXICAN A-AMERICAN INDIAN/NATIVE AMERICAN		A-ASIAN/ORIENTAL C-CHINESE J-JAPANESE		W-WHITE O-OTHER U-UNKNOWN																	
PERO N CODE A		TYPE CODE I		INJURY CODE N		1-NAME (LAST, FIRST, MIDDLE, SUFFIX) JERRY PEARSON																																			
STREET ADDRESS 2801 CERRILLOS		APT. NO.		CITY SANTA FE		CTY. NM		STATE 87505		ZIP 87505																															
RES. PHONE		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX M		RACE WHT BLK ASIA IND UNK																													
HEIGHT 6' 02"		WEIGHT 200 LBS		HAIR BRO		EYES BRO		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.																	
PERO N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																																			
STREET ADDRESS		APT. NO.		CITY		CTY.		STATE		ZIP																															
RES. PHONE		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX		RACE WHT BLK ASIA IND UNK																													
HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.																	
PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE																											
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.																													
PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE																											
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.																													
YEAR		MAKE		MODEL		BODY STYLE		LICENSE NO.		LIC. YEAR		LIC. ST.		TOP COLOR		BTM. COLOR																									
VALUE / DAMAGE EST.																																									
SYNOPSIS ON FRIDAY JULY 24TH, 2015 I, OFFICER SCOTT GILBERTSON MADE CONTACT WITH A MALE NAMED JERRY PEARSON AT A HOMELESS CAMP ON RUFINA CIRCLE. DISPATCH ADVISED THAT MR. PEARSON HAD AN OUTSTANDING WARRANT. MR. PEARSON WAS ARRESTED.																																									
CERT./STATUS		"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."		YES <input checked="" type="checkbox"/>		NO <input type="checkbox"/>		"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."		COMPLAINANT / VICTIM CERTIFICATION SIGNATURE X		DATE 07/24/2015																													
REPORTING OFFICER (PRINT) GILBERTSON, SCOTT		RANK POI		I.D. NO. 7232		DATE 07/24/2015		DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO		I.D. NO.		DATE																													
ASSISTING OFFICER (PRINT)		RANK		I.D. NO.		DATE		PROCESSED BY		DATE		DATA ENTRY PERSON		DATE																											
APPROVING OFFICER (PRINT)		RANK		I.D. NO.		DATE		INCIDENT STATUS ACTIVE INACT. CLOSED U.F. CLA. CL.E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		EXCEPT CODE		A-DEATH OF OFFENDER DECLINED C-EXTRADITION DENIED E-JUVENILE, NO CUSTODY		B-PROSECUTION COOPERATE D-VICTIM REF. TO NOT APPLICABLE		DATE																									
AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.)		CASES CLEARED BY THIS ARREST CASE NO.		CASE NO.		CASE NO.																																			

OCCURRENCE DATE(S)				DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-010854		STN# 04		PRIMAR YES																			
ON		OR		BETWEEN		MM/DD/YY		MM/DD/YY		MM/DD/YY		AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-010854		BURGLAR FORCE NO. F. NO. 1															
07/26/2015		07/26/2015		07/26/2015		ADDRESS / LOCATION OF INCIDENT 1149 CALLE AMANDA #C				CITY SANTA FE		CTY. 01		ZIP 87507		GANG REL. YES NO		HATE / BIAS MOT. CODE																	
TIME		DAY OF WEEK SUN		TIME		DAY OF WEEK SUN		TIME		DAY OF WEEK SUN		STATUTE OR ORDINANCE 30-16-3		FEL/ MISD. F		ATTEMPTED/ COMPLETED C		UCR OFFENSE CODE 220		DOM. VIOL. NO		SEX CRIME? NO		CHILD NO		CRIMINAL ACTIVITY CODE		LOCAT. CODE 20		WEAPON CODE 01		OFFENDER(S) SUSPECTED OF USING ALCOH. DRUG COMP.			
1		BURGLARY																																	
PERSON CODES		V-VICTIM		W-WITNESS		D-DECEASED		O-OTHER		TYPE CODES		P-POLICE		O-OTHER		INJURY CODES		ETHNIC CODES		A-ASIAN/ORIENTAL		W-WHITE													
G-PARENT/GUARDIAN		C-CITIZEN		D-DECEASED		O-OTHER		F-FINANCIAL INST.		G-GOVERNMENT		R-RELIGIOUS		S-SOCIETY/PUB		B-APPARENT BROKEN BONE		M-APPARENT MINOR INJURY		U-UNCONSCIOUSNESS		N-NONE													
R-REPORTING PERSON		S-SUSPECT		M-MISSING PERSON		A-ARRESTED		F-FINANCIAL INST.		G-GOVERNMENT		R-RELIGIOUS		S-SOCIETY/PUB		B-APPARENT BROKEN BONE		M-APPARENT MINOR INJURY		U-UNCONSCIOUSNESS		N-NONE													
H-INTERVIEWED		A-ARRESTED		M-MISSING PERSON		A-ARRESTED		F-FINANCIAL INST.		G-GOVERNMENT		R-RELIGIOUS		S-SOCIETY/PUB		B-APPARENT BROKEN BONE		M-APPARENT MINOR INJURY		U-UNCONSCIOUSNESS		N-NONE													
PERSON CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																													
N CODE		I CODE		N CODE		GUERRA																													
STREET ADDRESS																																			
APT. NO.																																			
CITY																																			
CTY.																																			
STATE																																			
ZIP																																			
RES. PHONE																																			
BUS. PHONE																																			
SOCIAL SECURITY NO.																																			
DOB																																			
AGE																																			
SEX																																			
RACE																																			
VHT																																			
BLK																																			
IND																																			
UNK																																			
HEIGHT																																			
WEIGHT																																			
HAIR																																			
EYES																																			
ETHNIC																																			
AGG. ASSAULT JUST.																																			
HOM. CODE																																			
VICTIM OF OFF. NO.																																			
VICTIM OF SUSP. NO.																																			
REL.																																			
VICTIM OF SUSP. NO.																																			
REL.																																			
VICTIM OF SUSP. NO.																																			
REL.																																			
PERSON CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																													
V		I		N		GUERRA																													
STREET ADDRESS																																			
APT. NO.																																			
CITY																																			
CTY.																																			
STATE																																			
ZIP																																			
RES. PHONE																																			
BUS. PHONE																																			
SOCIAL SECURITY NO.																																			
DOB																																			
AGE																																			
SEX																																			
RACE																																			
VHT																																			
BLK																																			
IND																																			
UNK																																			
HEIGHT																																			
WEIGHT																																			
HAIR																																			
EYES																																			
ETHNIC																																			
AGG. ASSAULT JUST.																																			
HOM. CODE																																			
VICTIM OF OFF. NO.																																			
VICTIM OF SUSP. NO.																																			
REL.																																			
VICTIM OF SUSP. NO.																																			
REL.																																			
VICTIM OF SUSP. NO.																																			
REL.																																			
PROPERTY STATUS																																			
TYPE																																			
77																																			
SCREEN																																			
UNKNOWN																																			
UNKNOWN																																			
CALIBER																																			
VALUE																																			
DRUG VALUE																																			
SUSPECTED DRUG TYPE																																			
QUANTITY																																			
1																																			
DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)																																			
WINDOW SCREEN BEDROOM																																			
SERIAL / OAN																																			
DATE RECOVERED																																			
N.I.C. NO.																																			
PROPERTY STATUS																																			
TYPE																																			
77																																			
CONSENT																																			
UNKNOWN																																			
UNKNOWN																																			
CALIBER																																			
VALUE																																			
DRUG VALUE																																			
SUSPECTED DRUG TYPE																																			
QUANTITY																																			
1																																			
DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)																																			
CONSENT TO SEARCH FROM JAZMIN LARA																																			
SERIAL / OAN																																			
DATE RECOVERED																																			
N.I.C. NO.																																			
YEAR																																			
MAKE																																			
CHRY																																			
MODEL																																			
SEB																																			
BODY STYLE																																			
CV																																			
LICENSE NO.																																			
LIC. YEAR																																			
LIC. ST.																																			
TOP COLOR																																			
SIL																																			
BTM. COLOR																																			
SIL																																			
VALUE / DAMAGE EST.																																			

OCCURRENCE DATE(S)		DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15010705		STN# 02		PRIMAR YES											
ON OR BETWEEN				AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-010705		BURGLAR FORCE NO F. <input type="checkbox"/> <input checked="" type="checkbox"/>		NO. OF UNITS ENT. 1											
MM/DD/YY 07/23/2015		MM/DD/YY 07/23/2015		MM/DD/YY 07/23/2015		ADDRESS / LOCATION OF INCIDENT 2218 MIGUEL CHAVEZ				CITY SANTA FE		CTY. 01		ZIP 87505		GANG REL. YES NO <input type="checkbox"/> <input checked="" type="checkbox"/>		HATE / BIAS MOT. CODE 00							
TIME 05:00		DAY OF WEEK THU		TIME 05:10		DAY OF WEEK THU		TIME 15:00		DAY OF WEEK THU															
OFFENSE / INCIDENT		STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING			
		1		UNLAW TAKING OF MOTOR VEHICLE		30-16D-1		F		A		240		NO		NO		NO		20		95		NO NO NO	
PERSON CODES G-PARENT/GUARDIAN R-REPORTING PERSON INTERVIEWED		V-VICTIM C-CITED S-SUSPECT A-ARRESTED		W-WITNESS D-DECEASED M-MISSING PERSON/ RUNAWAY		O-OTHER		TYPE CODES H-INDIVIDUAL B-BUSINESS F-FINANCIAL INST.		P-POLICE G-GOVERNMENT R-RELIGIOUS S-SOCIETY/PUB		O-OTHER U-UNKNOWN		INJURY CODES B-APPARENT BROKEN BONE I-POSSIBLE INTERNAL INJURY L-SEVERE LACERATION		M-APPARENT MINOR INJURY O-OTHER MAJOR INJURY T-LOSS OF TEETH		U-UNCONSCIOUSNESS N-NONE		ETHNIC CODES B-BLACK C-CHINESE H-HISPANIC/MEXICAN J-JAPANESE A-AMERICAN INDIAN/NATIVE AMERICAN		A-ASIAN/ORIENTAL C-CHINESE J-JAPANESE O-OTHER U-UNKNOWN		W-WHITE O-OTHER U-UNKNOWN	
		PERO N CODE V		TYPE CODE I		INJURY CODE N		1-NAME (LAST, FIRST, MIDDLE, SUFFIX) ROMERO																	
		STREET ADDRESS 2218 MIGUEL CHAVEZ		APT. NO. 215		CITY SANTA FE																			
		RES. PHONE (505) 577-5697		BUS. PHONE																					
		HEIGHT 5' 06"		WEIGHT 123 LBS		HAIR BRO		EYES HAZ		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO	
PERSON CODES G-PARENT/GUARDIAN R-REPORTING PERSON INTERVIEWED		V-VICTIM C-CITED S-SUSPECT A-ARRESTED		W-WITNESS D-DECEASED M-MISSING PERSON/ RUNAWAY		O-OTHER		TYPE CODES H-INDIVIDUAL B-BUSINESS F-FINANCIAL INST.		P-POLICE G-GOVERNMENT R-RELIGIOUS S-SOCIETY/PUB		O-OTHER U-UNKNOWN		INJURY CODES B-APPARENT BROKEN BONE I-POSSIBLE INTERNAL INJURY L-SEVERE LACERATION		M-APPARENT MINOR INJURY O-OTHER MAJOR INJURY T-LOSS OF TEETH		U-UNCONSCIOUSNESS N-NONE		ETHNIC CODES B-BLACK C-CHINESE H-HISPANIC/MEXICAN J-JAPANESE A-AMERICAN INDIAN/NATIVE AMERICAN		A-ASIAN/ORIENTAL C-CHINESE J-JAPANESE O-OTHER U-UNKNOWN		W-WHITE O-OTHER U-UNKNOWN	
		PERO N CODE V		TYPE CODE I		INJURY CODE N		1-NAME (LAST, FIRST, MIDDLE, SUFFIX) ROMERO																	
		STREET ADDRESS 2218 MIGUEL CHAVEZ		APT. NO. 215		CITY SANTA FE																			
		RES. PHONE (505) 577-5697		BUS. PHONE																					
		HEIGHT 5' 06"		WEIGHT 123 LBS		HAIR BRO		EYES HAZ		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO	
PROPERTY STATUS 5		PROPERTY TYPE 77		TYPE OF ITEM DNA SAMPLES		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE											
		SUSPECTED DRUG TYPE		QUANTITY 2		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.) DNA SAMPLES		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.											
		PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE									
		SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.											
		YEAR 1993		MAKE TOYT		MODEL CAM		BODY STYLE 4D		LICENSE NO. 376SXP		LIC. YEAR 2015		LIC. ST. NM		TOP COLOR GLD		BTM. COLOR GLD							
SYNOPSIS SUBJECTS (VICTIMS / SUSPECTS / PERSONS / BUSINESSSES)		"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."		YES NO <input type="checkbox"/> <input type="checkbox"/>		"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."		COMPLAINANT / VICTIM CERTIFICATION SIGNATURE X																	
		REPORTING OFFICER (PRINT) PINO, MARTIN		RANK		I.D. NO. 7464		DATE 07/23/2015		DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO		I.D. NO.		DATE											
		ASSISTING OFF																							

OCCURRENCE DATE(S)				DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO.		INCIDENT NO.		STN#		PRIMAR																			
ON OR BETWEEN										NM0260100		15-010847		09		YES																			
MM/DD/YY		MM/DD/YY		MM/DD/YY		AGENCY				GEOGR. CODE		CASE NUMBER		BURGLAR FORCE NO. F.		NO. OF UNITS ENT.																			
07/26/2015		07/26/2015		07/26/2015		SANTA FE PD				01075		15-010847		<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO																			
TIME		DAY OF WEEK		TIME		DAY OF WEEK		ADDRESS / LOCATION OF INCIDENT				CITY		CTY.		ZIP																			
01:40		SUN		02:04		SUN		113 WASHINGTON AVENUE				SANTA FE		01		87501																			
OFFENSE / INCIDENT						STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING									
						1 DOCUMENTED INFORMATION						SFPD-11		N		C				NO		NO		NO		14		99		UNK		UNK		NO	
PERSON CODES						V-VICTIM		W-WITNESS		O-OTHER		TYPE CODES		P-POLICE		O-OTHER		INJURY CODES		ETHNIC CODES		A-ASIAN/ORIENTAL		W-WHITE											
						G-PARENT/GUARDIAN		C-CITED		D-DECEASED		I-INDIVIDUAL		G-GOVERNMENT		U-UNKNOWN		B-BROKEN BONE		M-MINOR INJURY		U-UNCONSCIOUSNESS		B-BLACK		C-CHINESE		O-OTHER							
PERSON N CODE						R-REPORTING PERSON		S-SUSPECT		M-MISSING PERSON/		B-BUSINESS		R-RELIGIOUS		F-FINANCIAL INST.		S-SOCIETY/PUB		H-HISPANIC/MEXICAN		J-JAPANESE		U-UNKNOWN											
						H-INTERVIEWED		A-ARRESTED		RUNAWAY																									
PERSON N CODE						TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)		PATRICK																							
R						I		N		DURR																									
STREET ADDRESS						APT. NO.		CITY		CTY.		STATE		ZIP																					
113 WASHINGTON AVENUE								SANTA FE		01		NM		87501																					
RES. PHONE						BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX		RACE																			
(505) 988-3030														M		WHT BLK ASIA IND UNK																			
HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.											
6' 00"		276 LBS		BRO		BRO																													
PERSON N CODE						TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																									
STREET ADDRESS						APT. NO.		CITY		CTY.		STATE		ZIP																					
RES. PHONE						BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX		RACE																			
																WHT BLK ASIA IND UNK																			
HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.											
PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE																					
7		10		ALUMINUM CAN																															
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.																							
D		1																																	
PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE																					
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.																							
YEAR		MAKE		MODEL		BODY STYLE		LICENSE NO.		LIC. YEAR		LIC. ST.		TOP COLOR		BTM. COLOR																			
VALUE / DAMAGE EST.																																			
SYNOPSIS																																			
ON SUNDAY JULY 26TH, 2015 OFFICERS RESPONDED TO THE ABOVE ADDRESS IN REFERENCE TO A NARCOTICS VIOLATION. REPORTING PERSON STATED HE OBSERVED AN UNKNOWN MALE SUBJECT ON VIDEO APPROACH A FIRE EXTINGUISHER COMPARTMENT AND PULL AN ITEM OUT. THE MALE SUBJECT THEN WENT TO THE BATHROOM FOR SEVERAL MINUTES AND THEN LEFT.																																			
CERT / STATUS																																			
"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."																																			
YES NO																																			
"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."																																			
COMPLAINANT / VICTIM CERTIFICATION SIGNATURE X																																			
DATE																																			
REPORTING OFFICER (PRINT)																																			
LOVATO, GERALD																																			
RANK																																			
I.D. NO.																																			
DATE																																			
DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO																																			
I.D. NO.																																			
DATE																																			
ASSISTING OFFICER (PRINT)																																			
RANK																																			
I.D. NO.																																			
DATE																																			
PROCESSED BY																																			
DATE																																			
DATA ENTRY PERSON																																			
DATE																																			
APPROVING OFFICER (PRINT)																																			
RANK																																			
I.D. NO.																																			
DATE																																			
INCIDENT STATUS																																			
ACTIVE INACT. CLOSED U.F. CLA. CLE.																																			
EXCEPT CODE																																			
A-DEATH OF OFFENDER B-PROSECUTION DECLINED C-EXTRADITION DENIED D-VICTIM REF. TO COOPERATE E-JUVENILE NO CUSTODY H-NOT APPLICABLE																																			
CASES CLEARED BY THIS ARREST																																			
CASE NO.																																			
CASE NO.																																			
07/26/2015																																			